





Usability of Hydroxyurea for sickle cell disease patients in low-resource settings - retrospective cohort study in informal settlements of Nairobi, Kenya

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## Introduction

### Disease: sickle cell disease

- monogenic disorder
- · rendering red blood cells dense, rigid, and sickling

### results in vaso-occlusion, impaired blood flow, and acute and chronic complications

### Treatment : hydroxyurea / hydroxycarbamide

- cvtostatic drua
- can decrease frequency and severity of vasoocclusive crises, transfusion rates, and increase life expectancy

### Setting: informal settlements

- comprehensive clinic
- Nairobi, Kenya

Aim: describe hydroxyurea use and its associated outcomes in this special setting of informal settlements in Nairobi, Kenya

## Methods

#### Data:

- retrospective data
- 2'206 clinical visits
- 328 sickle-cell patients
- March 1st 2019 March 31st 2021

## Exposure:

- use of hvdroxvurea
- dosage of hydroxyurea

#### Outcomes:

- clinical outcomes
- vaso-occlusive crisis
- major complication (acute coronary syndrome, aplastic crisis, splenic sequestration, stroke, ulcer)
- infection (urinary tract, pneumonia, osteomyelitis, malaria, etc.)
- laboratory measurements
- haemoglobin (g/dl)
- mean corpuscular volume (fl)

#### Methods:

- mixed linear regression
- mixed competing-risk Cox regression
- adjustment for baseline laboratory measurements, event history, weight < 5<sup>th</sup> percentile, age at baseline, gender

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- Results
- incidence rate of vasoocclusive crisis and infection was lower in users compared to nonusers
- incidence of major complications was somewhat higher for users, but low in both groups



Figure 1: incidence rates of clinical outcomes per 10 person-years for hydroxyurea users vs. non-users, along with 95% confidence intervals



Figure 2: hazard ratios of clinical outcomes for hydroxyurea use and dosage, with 95% confidence intervals



Figure 3: regression coefficients for hydroxyurea use and dosage, with 95% confidence intervals

· Hydroxyurea use independently increased both hemoglobin and mean corpuscular volume, given adjustment for potential confounders

# Conclusion

- given close patient monitoring, hydroxyurea use in this setup of informal settlements may be associated with a decreased hospitalization rate and less frequent vaso-occlusive episodes
- hydroxyurea might not be beneficial in averting subsequent complications
- · further investigations needed to learn more about hydroxyurea's effectiveness, advantages and disadvantages in this specific pediatric population



a dosage >= 20 mg/kg is similarly related to vasoocclusive crisis as 20-25 mg/kg, but reducing hazards of infection and major complication